



DIANA M. BONTÁ, R.N., Dr. P.H.
Director

State of California—Health and Human Services Agency
Department of Health Services



GRAY DAVIS
Governor

CHIP Letter : 02-H
RHS Letter : 02-H
Date Issued : October 16, 2002

TO: CALIFORNIA HEALTHCARE FOR INDIGENTS PROGRAM (CHIP)/RURAL
HEALTH SERVICES (RHS) PROGRAM CONTACT PERSON

SUBJECT: FISCAL YEAR (FY) 2002-03 DESCRIPTION OF PROPOSED
EXPENDITURES

Enclosed are the guidelines and forms for the submission of your County Health Services FY 2002-03 Description of Proposed Expenditures of CHIP/RHS Program Funds. This information is also available on the Office of County Health Services' web site at:

http://www.dhs.ca.gov/hisp/ochs/chsu/CHIPRHS_County_Letters.htm

The deadline for submission of this report is December 16, 2002. Once completed, please submit report to:

California Department of Health Services
Office of County Health Services
County Health Services Unit
1800 Third Street, Room 100
P.O. Box 942732
Sacramento, CA 94234-7320

Please note that CHIP/RHS payments may be delayed if your County's Description of Proposed Expenditures Report is received after the deadline.



Do your part to help California save energy. To learn more about saving energy, visit the following web site:
www.consumerenergycenter.org/flex/index.html

1800 Third Street, Room 100, PO Box 942732, Sacramento, CA 94234-7320
(916) 322-1086

Internet Address: www.dhs.ca.gov

CHIP/RHS Contact Person

Page 2

October 16, 2002

If you have any questions or are unable to meet the December 16th deadline, please contact your County Health Services analyst.

Sincerely,

ORIGINAL SIGNED BY NANCY HAYWARD

Nancy Hayward, Chief
Medically Indigent Services Section

Enclosures

cc: See Next Page.

[FY 02-03 Description of Proposed Expenditures Forms](#)

October 16, 2002

cc: George B. (Peter) Abbott, M.D., M.P.H., Chief
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October 16, 2002

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Senate Budget and Fiscal
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Auditor-Controller Contacts

Board of Supervisors Contacts

Health Officer Contacts